Case 6:22-bk-10336-MH Doc 1 Filed 01/30/22 Entered 01/30/22 05:59:56 Desc Main Document Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Michael First name Anthony	First name	_			
	,	Middle name	Middle name				
	Bring your picture identification to your meeting with the trustee.	Middione Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4858					

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Case number (if known)

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 17323 Poplar St. Hesperia, CA 92345 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code San Bernardino County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. 16808 Man St Ste D # 138 Hesperia, CA 92345 Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Debtor 1

Michael Anthony Middione

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Debtor 1 Michael Anthony Middione

Case number (if known)

ar	t 2: Tell the Court About	Your Ba	nkruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subi	pically, if you are paying the fee y	ck with the clerk's office in your local court for more of ourself, you may pay with cash, cashier's check, or realf, your attorney may pay with a credit card or check.	money	
					tallments. If you choose this optits (Official Form 103A).	on, sign and attach the Application for Individuals to	Pay	
			request that out is not req	at my fee be wa uired to, waive	aived (You may request this option	n only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty l n installments). If you choose this option, you must f	ine that	
						cial Form 103B) and file it with your petition.	iii oat	
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes			14.0			
			District		When When	Case number		
			District			Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	☐ Yes	i <u>.</u>					
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No.	Go to I	ine 12.				
	residence?	Yes	. Has yo	our landlord obta	ained an eviction judgment again	st you?		
				No. Go to line	12.			
				Yes. Fill out <i>In</i> bankruptcy per		Judgment Against You (Form 101A) and file it with t	his	

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Debtor 1 Michael Anthony Middione

Case number (if known)

Par	t 3: Report About Any Bu	sinesses `	You Own as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.
		☐ Yes.	Name and location of business
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any
	If you have more than one sole proprietorship, use a		Number, Street, City, State & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate box to describe your business:
			Health Care Business (as defined in 11 U.S.C. § 101(27A))
			Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as defined in 11 U.S.C. § 101(53A))
			Commodity Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of the above
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small		proceed of you are c	ifiling under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or hoosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, v statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. (B). I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		☐ Yes.	I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
		☐ Yes.	I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is the hazard?
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property? Number, Street, City, State & Zip Code

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Debtor 1 Michael Anthony Middione

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2	(Spouse	Only in a	Joint (Case):
-----------------------	---------	-----------	---------	--------

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Michael Anthony	Middione		Case nun	nber (if known)
Par	6: Answer These Quest	ions for R	eporting Purposes	. Dinos acto	Marie de la companya della companya
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a p	consumer debts? Consumer debts are described on the consumer debts are described on the consumer debts are described on the consumer debts?	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.	C3 s nobelous - 319 million	Lista de nota de la companya del companya del companya de la compa
		16b.	Are your debts primarily money for a business or in	business debts? Business debts are det investment or through the operation of the b	ots that you incurred to obtain ousiness or investment.
			☐ No. Go to line 16c.	- 0500 million	
			☐ Yes. Go to line 17.	The Control Control of	
		16c.	State the type of debts you	u owe that are not consumer debts or busin	ness debts
		13 400.	9E1 - E3003000	1 5100 000,001 - 3500 million	
7.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap		L. L. Tados Y. and V. S. P. Clark
	Do you estimate that after any exempt property is excluded and	Yes.	I am filing under Chapter are paid that funds will be	Do you estimate that after any exempt prevailable to distribute to unsecured creditor	roperty is excluded and administrative expense ors?
	administrative expenses are paid that funds will		■ No	 2. The second solution in we expected to select the second solution of the selection. 	
	be available for		□Yes		
	distribution to unsecured creditors?	document i, no atto	it, I have obtained and read	id not pay or agree to pay to neche with the notice required by 11 U.S.C. § 342(b)	
8.	How many Creditors do	■ 1-49	relief in air ordance with th	ne chapte 1 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	□ 50-99		on cons 🗖 5001-10,000 obtaining more	
	owe:	□ 100-1 □ 200-9	99	er In 325 □10,001-25,000 vent sor up to 2	More than100,000
9.	How much do you	s 0 - \$	550,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	C	001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	DO WOTHIT.		,001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500	,001 - \$1 million	□ \$100,000,001 - \$500 million	More than \$50 billion
0.	How much do you	□ \$0 - \$	\$50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	\$50,	001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
	to be?	□ \$100	,001 - \$500,000	□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion
		□ \$500	,001 - \$1 million	individua	☐ More than \$50 billion
ar	t 7: Sign Below		TO THE STATE OF TH		
or	you	I have e	xamined this petition, and I	declare under penalty of perjury that the in	formation provided is true and correct.
		If I have United S	chosen to file under Chapte States Code. I understand th	er 7, I am aware that I may proceed, if eligi ne relief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
		If no atto	orney represents me and I d nt, I have obtained and read	did not pay or agree to pay someone who is d the notice required by 11 U.S.C. § 342(b)	s not an attorney to help me fill out this
I request relief in accordance with the				he chapter of title 11, United States Code,	specified in this petition.
		l unders bankrup and 357	tcy case can result in fines	ent, concealing property, or obtaining mone apto \$250,000, or imprisonment for up to 2	ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519
			el Anthony Middione re of Debtor 1	Signature of De	ebtor 2
		Execute	d on $1-29-22$	Executed on	
			MM/DD/YYYY		MM / DD / YYYY

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Email address

thetravislawfirm@aol.com

Case number (if known) Michael Anthony Middione I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed For your attorney, if you are under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the If you are not represented by schedules filed with the petition is incorrect. an attorney, you do not need to file this page. Date Signature of Attorney for Debtor Dana Faith Travis 245316 Printed name The Travis Law Firm Firm name 4294 Orange St. Riverside, CA 92501

245316 CA

Number, Street, City, State & ZIP Code
Contact phone 951-274-9501

Bar number & State

v394 Crute, e.c. Riccerause L. C2583

STATEMENT OF RELATED CASES **INFORMATION REQUIRED BY LBR 1015-2** UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

No	·n	-

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof, If none, so indicate, Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None for I declare, under penalty of perjury, that the foregoing is true and correct. Executed at Riverside Michael Anthony Middione 1-29-22 Signature of Debtor 1 Date: Signature of Debtor 2

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Fill in this infor	mation to identify your	case:	.,		
Debtor 1					
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number					
(if known)					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	48,458.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	48,458.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	31,301.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	19,547.00
	Your total liabilities	\$	50,848.00
⊃aı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,978.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,386.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
3.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Michael Anthony Middione

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____4,853.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Main Document	Page 11 of 51		
Fill in this info	rmation to identify your cas	se and this filing:			
Debtor 1	Michael Anthony Mi	ddione			
Dobto. 1	First Name		ast Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name L	ast Name		
United States E	Bankruptcy Court for the: CE	ENTRAL DISTRICT OF CALIFOR	RNIA		
Case number				[
					amended filing
Official F	orm 106A/B				
_		et.			4044=
	le A/B: Prope	ems. List an asset only once. If an			12/15
hink it fits best. nformation. If mo nswer every qu	Be as complete and accurate a ore space is needed, attach a se estion.	s possible. If two married people a eparate sheet to this form. On the t and, or Other Real Estate You Own	re filing together, both ar op of any additional page	e equally responsible for supp	lying correct
Do way awa a	r baya any lanal ar any itable int	avest in any residence building le	nd as aimiles assessed 2		
. ບບ you own o	i ilave aliy legal or equitable int	erest in any residence, building, la	nu, or similar property?		
No. Go to P	art 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	e Your Vehicles				
□ No ■ Yes	trucks, tractors, sport utility	•			
3.1 Make:	Harley Davidson	Who has an interest in the p	property? Check one	Do not deduct secured clair the amount of any secured	
Model:	FXDF-103 Dyna Fat Bol	Debtor 1 only		Creditors Who Have Claims	
Year:	2014	☐ Debtor 2 only		Current value of the	Current value of the
Approxim	ate mileage:	Debtor 1 and Debtor 2 onl	y		portion you own?
Other info	ormation:	At least one of the debtors	and another		
			4	\$12,236.00	\$12,236.00
		Check if this is commun (see instructions)	ity property	412,200.00	Ψ12,200.00
3.2 Make:	Toyota	Who has an interest in the p	aranartu 2 Chaele ana	Do not deduct secured clair	ns or exemptions. Put
	Corolla	_ <u>_</u>	Toperty r Check one	the amount of any secured	
Model:	2021	Debtor 1 only		Creditors Who Have Claims	Зесигеа ву Ргорепу.
Year:	ate mileage: 1000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 onl	.,		Current value of the portion you own?
Other info		At least one of the debtors	•	entile property:	portion you own:
<u> </u>		At least one of the debtors	and another		
		Check if this is commun (see instructions)	ity property	\$24,722.00	\$24,722.00
Motororoft	nivereft motor homes ATV	and other recreational vehicle	o othor vohiolog and	acceptation	
		s and other recreational vehicle I watercraft, fishing vessels, snov			
	,,		, 		
No					
ΠVoc					

Official Form 106A/B Schedule A/B: Property page 1

De	ebtor 1	Michael Ant	Main Document Page 1 hony Middione	2 of 51 Case number (if known)	
5		e dollar value of	the portion you own for all of your entries from Part 2, incl ed for Part 2. Write that number here		\$36,958.00
Pa	art 3: De	scribe Your Perso	nal and Household Items		
			egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Exampl	old goods and fes: Major appliar	furnishings nces, furniture, linens, china, kitchenware		dams of exemptions.
			household goods and furnishings		\$1,200.00
7.	□No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; compute phones, cameras, media players, games	rs, printers, scanners; music col	lections; electronic devices
			electronics		\$1,100.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or ons, memorabilia, collectibles	other art objects; stamp, coin, o	or baseball card collections;
9.		ent for sports a es: Sports, photo musical instr	graphic, exercise, and other hobby equipment; bicycles, pool ta	ables, golf clubs, skis; canoes ar	nd kayaks; carpentry tools;
	■ No □ Yes.	Describe			
	■ No		s, shotguns, ammunition, and related equipment		
	Clothe Examp	s	othes, furs, leather coats, designer wear, shoes, accessories		
			clothing		\$300.00
12.	□ No		welry, costume jewelry, engagement rings, wedding rings, heirlo	oom jewelry, watches, gems, go	ld, silver
			jewelry		\$1,400.00
13.	. Non-fa	rm animals			

Examples: Dogs, cats, birds, horses

No

☐ Yes. Describe.....

Case 6:22-bk-10336-MH Doc 1 Filed 01/30/22 Entered 01/30/22 05:59:56 Main Document Page 13 of 51 Debtor 1 Case number (if known) **Michael Anthony Middione** 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... \$500.00 Union Bank - 9958 17.1. checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company *Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No
□ Yes...... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Case 6:22-bk-10336-MH Doc 1 Filed 01/30/22 Entered 01/30/22 05:59:56 Main Document Page 14 of 51 Debtor 1 Case number (if known) **Michael Anthony Middione** ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... \$7,000.00 2021 possible tax refund state and federal 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

☐ Yes. Describe each claim.......

page 4

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Debtor 1	Michael Anthony Middione		Case number (if known)	
35. Any f	inancial assets you did not already list			
No				
☐ Yes	. Give specific information			
	the dollar value of all of your entries from Part 4, includin Part 4. Write that number here			\$7,500.00
Part 5: D	escribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. Do yo u	own or have any legal or equitable interest in any business-relate	ed property?		
No. C	Go to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Property You	Own or Have an Interes	st In.	
IT	you own or have an interest in farmland, list it in Part 1.			
46. Do y o	ou own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
■ No	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
	ou have other property of any kind you did not already list? nples: Season tickets, country club membership	?		
No				
☐ Yes	. Give specific information			
54. Add	the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$0.00
56. Part	2: Total vehicles, line 5	\$36,958.00		· · · · · · · · · · · · · · · · · · ·
57. Part	3: Total personal and household items, line 15	\$4,000.00		
58. Part	4: Total financial assets, line 36	\$7,500.00		
59. Part	5: Total business-related property, line 45	\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54 +	\$0.00		
62. Tota	al personal property. Add lines 56 through 61	\$48,458.00	Copy personal property total	\$48,458.00
63. Tota	al of all property on Schedule A/B. Add line 55 + line 62			\$48,458.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor	mation to identify your	case:		
Debtor 1	Michael Anthony	Middione		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
Case number				
(if known)				☐ Check amen

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2014 Harley Davidson FXDF-103 Dyna Fat Bob	\$12,236.00		\$1,731.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2021 Toyota Corolla 10000 miles Line from Schedule A/B: 3.2	\$24,722.00		\$3,926.00	C.C.P. § 703.140(b)(2)
Elle from Schedule PAB. G.E			100% of fair market value, up to any applicable statutory limit	
household goods and furnishings Line from Schedule A/B: 6.1	\$1,200.00		\$1,200.00	C.C.P. § 703.140(b)(3)
Ellie Irom Schedule Arb. 4.1			100% of fair market value, up to any applicable statutory limit	
electronics Line from Schedule A/B: 7.1	\$1,100.00		\$1,100.00	C.C.P. § 703.140(b)(3)
End nom deficable AVE. 1.1			100% of fair market value, up to any applicable statutory limit	
clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	C.C.P. § 703.140(b)(3)
Line nom <i>Schedule A/D</i> . 11.1			100% of fair market value, up to any applicable statutory limit	
			any applicable statutory limit	

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De	ebtor 1 Michael Anthony Middione			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim Sportion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	jewelry Line from Schedule A/B: 12.1	\$1,400.00		\$1,400.00	C.C.P. § 703.140(b)(4)
	Line from Generalic Add. 12.1			100% of fair market value, up to any applicable statutory limit	
	checking: Union Bank - 9958 Line from Schedule A/B: 17.1	\$500.00		\$500.00	C.C.P. § 703.140(b)(5)
	Line IIOII Scriedule AVD. 17.1			100% of fair market value, up to any applicable statutory limit	
	state and federal: 2021 possible tax refund	\$7,000.00		\$7,000.00	C.C.P. § 703.140(b)(5)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every № No Yes. Did you acquire the property covery	3 years after that for ca	ises fi	•	,
	☐ No	ed by the exemption wi	U1111 1	,215 days belore you liled tris case	•
	П Vaa				

		Main Document Pa	age 1	L8 of 51		
Fill in this inform	ation to identify yo					
Debtor 1	Michael Anthor	av Middione				
Bobton 1	First Name	Middle Name Last Nar	ne			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last Na	ne			
United States Ban	kruptcy Court for the	: CENTRAL DISTRICT OF CALIFORNIA	١			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form	106D					
Official Form			_			
Schedule I	D: Creditors	Who Have Claims Secu	ıred	by Propert	У	12/15
		If two married people are filing together, both out, number the entries, and attach it to this fo				
1. Do any creditors h	nave claims secured b	y your property?				
☐ No. Check	this box and submit	this form to the court with your other schedul	es. You	u have nothing else t	o report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List All	Secured Claims					
•		more than one secured claim, list the creditor sepa	arately	Column A	Column B	Column C
for each claim. If mo	re than one creditor ha	s a particular claim, list the other creditors in Part 2 ical order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Freedom R	Road Financial	Describe the property that secures the claim		value of collateral. \$10.505.00	claim \$12,236.00	If any Unknown
Creditor's Name	TOAU I IIIAIICIAI	2014 Harley Davidson FXDF-103	. –	ψ10,303.00	Ψ12,230.00	Olikilowii
		Dyna Fat Bob				
Attn: Bank		As of the date you file, the claim is: Check all the	hat			
Po Box 459		apply.	iai			
Oak Brook	<u> </u>	Contingent				
Number, Street, V	City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortgage	or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	en)			
☐ At least one of the	e debtors and another	\square Judgment lien from a lawsuit				
☐ Check if this cla community deb		☐ Other (including a right to offset)				
Date debt was incu	Opened 05/21 Last Active	Last 4 digits of account number 1	031			

Date debt was incurred 12/02/21

Last 4 digits of account number

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Debte	or 1 Michael A	Anthony Middi	one		Case	e number (if known)		
	First Name	Middle N	lame	Last Name				
2.2	Toyota Finan Services	cial	Describe the	e property that secures the o	claim:	\$20,796.00	\$24,722.00	Unknown
	Creditor's Name		2021 Toy	ota Corolla 10000 mile	s			
	Attn: Bankru Po Box 8026 Cedar Rapids		As of the da apply.	te you file, the claim is: Chec	k all that			
-	Number, Street, City,	State & Zip Code	☐ Unliquida					
Who	owes the debt?	Check one.	☐ Disputed Nature of Ii	en. Check all that apply.				
	ebtor 1 only ebtor 2 only		An agree	ment you made (such as mort	gage or secure	d		
□ De	ebtor 1 and Debtor	2 only	☐ Statutory	lien (such as tax lien, mechan	ic's lien)			
☐ At	least one of the de	ebtors and another	Judgmen	t lien from a lawsuit				
	neck if this claim ommunity debt	relates to a	Other (in	cluding a right to offset)				
Date (debt was incurred	Opened 04/21 Last Active 12/09/21	Last	4 digits of account number	0001			
If th		e of your form, add		is page. Write that number lue totals from all pages.	here:	\$31,301.0 \$31,301.0		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one Creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this informat	ion to identify your		am Docume	eni Pa	ge 20 ()I 3I			
_	Michael Anthony First Name	Middle	Name	Last Nam)				
Debtor 2									
(Spouse if, filing)	First Name	Middle	Name	Last Nam	•				
United States Bankr	uptcy Court for the:	CENTRAL	DISTRICT OF C	CALIFORNIA					
Case number									
(if known)								Check if this	s is an
							_l a	mended fili	ing
Official Form 1	106E/E								
	: Creditors W	ho Hav	a Unsacura	d Claim	2			1'	2/15
any executory contract Schedule G: Executory Schedule D: Creditors	ccurate as possible. Us ts or unexpired leases y Contracts and Unexp Who Have Claims Sec uation Page to this pag er (if known).	that could re ired Leases (ured by Prop	esult in a claim. Al (Official Form 1060 erty. If more space	so list executo 3). Do not inclu e is needed, co	ry contract de any cre py the Part	s on Schedule A/B: ditors with partially you need, fill it out	Property (Offici secured claims number the en	ial Form 106 that are list tries in the l	6A/B) and on ted in boxes on the
Part 1: List All o	f Your PRIORITY Un	secured Cl	aims						
1. Do any creditors	have priority unsecure	d claims agai	inst you?						
☐ No. Go to Part	2.								
Yes.									
identify what type or possible, list the cla Part 1. If more than	iority unsecured claims of claim it is. If a claim ha aims in alphabetical orde n one creditor holds a pa n of each type of claim, s	as both priority er according to rrticular claim,	and nonpriority amount the creditor's name list the other creditor	ounts, list that one. If you have more in Part 3.	laim here a ore than tw	nd show both priority	and nonpriority a	amounts. As Continuation	much as
							amount	amo	
2.1 San Berna Priority Credite	ardino County Dep	<u>)t.</u>	Last 4 digits of acc	count number	9163	\$0.00	\$	0.00	\$0.00
Attn: Bank					Opened	l 04/21 Last			
	119064 Mail Statio		When was the deb	ot incurred?	Active	12/31/21	_		
	ordova, CA 95741 et City State Zip Code		As of the date you	file, the claim	is: Check a	ıll that annly			
	e debt? Check one.		☐ Contingent	,		алас аррту			
Debtor 1 only			☐ Unliquidated						
Debtor 2 only			Disputed						
☐ Debtor 1 and	Debtor 2 only		Type of PRIORITY	unsecured cla	im:				
_	f the debtors and anothe	er	■ Domestic suppo	ort obligations					
_	claim is for a commun		☐ Taxes and certa	=	ou owe the	government			
Is the claim subj		•	☐ Claims for death			•			
■ No			☐ Other. Specify						
☐ Yes				notice only	,				
Part 2: List All o	f Your NONPRIORIT	Y Unsecure	d Claims						
3. Do any creditors	have nonpriority unsec	ured claims	against you?						
☐ No. You have n	nothing to report in this p	art. Submit thi	is form to the court v	with your other	chedules.				
Yes.									
4 List all of your no	npriority unsecured cl	aims in the a	lphabetical order o	of the creditor	vho holds	each claim. If a cred	itor has more tha	n one nonnr	iority

unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Michael Anthony Middione Case number (if known)

Nonprintive Correlator's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 7998 Number Street City State Zip Code Who incurred the debt? Chock one. Debtor 1 only Debtor 2 only Debtor 1 only As of the date you file, the claim is: Check all that apply	4.1	Amex	Last 4 digits of account number	6053	\$1,028.00
Number Street City State 2 pot As of the date you file, the claim is: Check all that apply Debtor 1 only		Po Box 981540	When was the debt incurred?		
Debtor 2 only Debtor 3 only Disputed		Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 and Debtor 2 only		_	=		
At least one of the debtors and another Check if this claim is for a community debt Check if this claim subject to offset? Check if this claim is for a community debt Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim is for a community Check if this claim subject to offset? Check one. Check offset? Check of		<u> </u>	_ '		
Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community check if this claim subject to offset? Check if this claim is check all that apply Check if this claim is for a community check if this claim is check if this			•	d alaim.	
Crick this claim subject to offset? Contingent		_	• •	a ciaim:	
Capital One		debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Sait Lake City, UT 84130 Number Street City State 2 only Debtor 1 only Ves As of the date you file, the claim is: Check all that apply As of the date you file, the claim separation agreement or divorce that you did not report as priority claims Very Box 30285 Sait Lake City, UT 84130 No Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor			<u>-</u> ' ' '	a plans, and other similar debts	
Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debtor and another Capital One			·		
Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Check if this claim is for a community debt is the claim subject to offset?					
Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 she claim subject to offset? Attribute City, UT 84130 Nounber Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Attribute City, UT 84130 Number Street City, State Zip Code Who incurred the debtors and another Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Attribute City, UT 84130 Number Street City, State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Student loans Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Student loans Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 offset? Student loans Debtia 1 only Debtor 7 only Disputed Type of NONPRIORITY unsecured claim: Debtor 6 only Debtor 7 only Disputed Type of NONPRIORITY unsecured claim: Debtor 6 only Debtor 7 only Disputed Type of NONPRIORITY unsecured claim: Debtor 6 only Debtor 7 only Disputed Type of NONPRIORITY unsecured claim: Debtor 8 only Debtor 9 only Debtor 9 only Disputed Type of NonPrioRitry unsecured claim: Debtor 9 only Disputed Type of NonPrioRitry unsecured claim: Debtor 9 only Disputed Type of NonPrioRitry unsecured claim: Debtor 9 only Disputed Type of NonPrioRitry unsecured claim: Debtor 9 only Disputed Type of NonPrioRitry unsecured claim: Debtor 9 only D	4.2		Last 4 digits of account number	1835	\$7,290.00
As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Other. Specify Credit Card Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Unliquidated Other. Specify Credit Card Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Credit Card Contingent Debtor 1 and Debtor 2 only Contingent Student loans Copital one Contingent Student loans Copital one Contingent Debtor 1 and Debtor 2 only Contingent Student loans Copital one Contingent Student loans Copital one Student loans Copital one Contingent Contingent Contingent Contingent Contingent Contingent Copital one Contingent Copital one		Attn: Bankruptcy Po Box 30285	When was the debt incurred?		
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt No Debts to pension or profit-sharing plans, and other similar debts Attri. Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debts only Debts 1 and Debtor 2 only Debts 1 and Debtor 2 only Debts 1 and Debtor 2 only Debts 2 only Debts 1 and Debtor 2 only Debts 1 and Debtor 2 only Contingent Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Student loans Cobligations arising out of a separation agreement or divorce that you did not report as priority claims Credit Card Opened 03/17 Last Active 10/21 As of the date you file, the claim is: Check all that apply At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Opened 03/17 Last Active No porbor 1 only No incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Opened 03/17 Last Active 10/21 As of the date you file, the claim is: Check all that apply Obstact 3 only Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 onforce the debtor of t		Debtor 1 only	☐ Contingent		
At least one of the debtors and another		☐ Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Check if this claim subject to offset? Credit Card		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
Check if this claim is for a community debt Check in this claim is for a community debt Street City State Zip Code Contingent Contingent Contingent Check iff this claim is for a community debt Check iff this claim is for a community debt Check iff this claim subject to offset? Check iff this claim subject to offset? Code Contingent Check iff this claim is for a community debt Check on community debt Check on community debt Check offset? Check on community check on community debt Check offset? Check of		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Is the claim subject to offset? No		☐ Check if this claim is for a community	☐ Student loans		
Yes				ration agreement or divorce that you did not	
Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Last 4 digits of account number 5926 Salt Lake City, UT 84130 Opened 03/17 Last Active 10/21 As of the date you file, the claim is: Check all that apply Check all that apply Type of NonPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts		No	Debts to pension or profit-sharin	g plans, and other similar debts	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debtor 1 onfset Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Yes	Other. Specify Credit Card		
Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Opened 03/17 Last Active 10/21 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply	4.3		Last 4 digits of account number	5926	\$387.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Attn: Bankruptcy Po Box 30285	When was the debt incurred?	•	
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
□ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_	□ continuent		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		·			
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			_ '		
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts		•		d claim:	
debt				a Oldmin.	
■ No □ Debts to pension or profit-sharing plans, and other similar debts		debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
			<u></u>	g plans, and other similar debts	

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Debtor 1 Michael Anthony Middione Case number (if known)

Chase Card Services	Last 4 digits of account number	3212	\$2,457.0
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 12/16 Last Active	
Po Box 15298	When was the debt incurred?	09/21	
Wilmington, DE 19850	_		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No.	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card		
Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	5896	\$2,441.00
Attn: Bankruptcy		Opened 05/16 Last Active	
Po Box 15298	When was the debt incurred?	10/21	
Wilmington, DE 19850	_		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
ebt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card		
Citibank	Last 4 digits of account number	7584	\$1,789.00
Nonpriority Creditor's Name			ψ1,109.00
Attn: Bankruptcy		Opened 04/18 Last Active	
P.O. Box 790034	When was the debt incurred?	7/01/21	
St Louis, MO 63179 Number Street City State Zip Code	As of the date you file the stairs	s: Check all that apply	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	ъ. Спеск ан тпат арргу	
_			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	0 0 1	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	= -	
☐ Yes	Other. Specify Credit Card		

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Debtor 1 Michael Anthony Middione Case number (if known)

Discover Financial	Last 4 digits of account number	3722	\$4,155.0
Nonpriority Creditor's Name	_		
Attn: Bankruptcy		Opened 11/15 Last Active	
Po Box 3025	When was the debt incurred?	08/21	
New Albany, OH 43054			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card		

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	
				>	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	19,547.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	19,547.00

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Fill in this infor	mation to identify your	case:					
Debtor 1	Michael Anthony Middione						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA				
Case number							
(if known)							

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company wit Name, Numb	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				-
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	,				

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Fill in this	information to identify your	case:	int rage 20	7 01 01	
Debtor 1	Michael Anthony	Middione			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	CENTRAL DISTRICT OF C	ALIFORNIA		
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	l Form 106H				
_	lule H: Your Cod	ebtors			12/15
people are fill it out, a your name 1. Do No Yes 2. Witt Arizor	and number the entries in the e and case number (if known) you have any codebtors? (If the second se	ally responsible for supplyin boxes on the left. Attach the . Answer every question. you are filing a joint case, do not lived in a community properation. Nevada, New Mexico, Puerto	ng correct information Additional Page to not list either spouse a erty state or territory Rico, Texas, Washir	on. If more space is needed this page. On the top of as a codebtor. (Community property stangton, and Wisconsin.)	ed, copy the Additional Page, any Additional Pages, write
	Alexis Estrada	, ,		_	·
	Name of your spouse, former spo Number, Street, City, State & Zip				
	In which community state Candie Mcleish	e or territory did you live?	California	. Fill in the name and cu	irrent address of that person.
	Name of your spouse, former spouse, Number, Street, City, State & Zip				
in line Form out C	lumn 1, list all of your codebt e 2 again as a codebtor only i 106D), Schedule E/F (Official olumn 2.	ors. Do not include your spo f that person is a guarantor	or cosigner. Make s	ure you have listed the cr 6G). Use Schedule D, Sch	th you. List the person shown reditor on Schedule D (Official redule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The credito Check all schedules the	r to whom you owe the debt at apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
-	Number Street City	State	ZIP Code		
3.2	Name			Schedule D, line Schedule E/F, line Schedule G, line	
	Number Street City	State	ZIP Code		

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Debtor 1	Michael Anthony Middione	Case number (if known)	
	Additional Page to List More Codebtors		
	Column 1: Your codebtor	Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:

Include part-time, s self-employed work Occupation may ind or homemaker, if it	clude student	Employer's address How long employed the	Riverside	niversai va Ave #100 e, CA 92507 13 years		
self-employed work Occupation may inc	clude student		1700 low	va Ave #100		
		Employer 5 maine	Allies Ur	niversai		
		Employer's name				
employers.		Occupation	security	guard		unemployed
attach a separate p information about a	age with	Employment status	□ Not em			■ Not employed
information. If you have more th	an one iob		■ Employ	ved		☐ Employed
1. Fill in your employ	ment		Debtor 1			Debtor 2 or non-filing spouse
supplying correct inforr spouse. If you are sepa attach a separate sheet	nation. If you rated and you	are married and not filing wi	ng jointly, ar th you, do n	nd your spouse is lot include informa	iving with tion abou	otor 2), both are equally responsible for a you, include information about your it your spouse. If more space is needed umber (if known). Answer every questi
Schedule I: Y	our Inc	ome				12
Official Form	<u> 1061</u>					MM / DD/ YYYY
						A supplement showing postpetition chapte I3 income as of the following date:
(If known)					_	An amended filing
United States Bankruptc Case number	y Court for the	: CENTRAL DISTRICT	OF CALIFO	RNIA	Char	ck if this is:
Debtor 2 (Spouse, if filing)						
	WIICHAEI AIIL	hony Middione				
Debtor 1	Michael Ant					

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

B. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non-filir	ng spouse
2.	\$	4,853.00	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	4,853.00	\$	0.00

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Michael Anthony Middione	-	•	Case number (<i>if k</i>	now	7)				
					For Debtor 1			non-	Debtor 2 filing s _l	pouse	
	Cop	by line 4 here	4.		\$4,85	3.0	<u>0</u>	\$		0.00	<u>)</u>
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$ 67	1.0	0	\$		0.00)
	5b.	Mandatory contributions for retirement plans	5b	b.		0.0		\$	-	0.00	
	5c.	Voluntary contributions for retirement plans	50	C.	\$	0.0	0	\$		0.00)
	5d.	Required repayments of retirement fund loans	50	d.		0.0	0	\$		0.00	
	5e.	Insurance	56		·	0.0	_	\$		0.00	
	5f.	Domestic support obligations	5f		\$1,20			\$		0.00	_
	5g. 5h.	Union dues Other deductions. Specify:	50	g. h.+		0.0		+ \$		0.00	
_			_		· ——		<u>0</u> -			0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 1,87			\$		0.00	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	8.0	<u>U</u>	\$		0.00	<u>)</u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88			0.0		\$		0.00	
	8b.	Interest and dividends	8b	b.	\$	0.0	0_	\$		0.00)
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	c	\$	0.0	n	\$		0.00	1
	8d.	Unemployment compensation	80		·	0.0		\$		0.00	
	8e.	Social Security	86	е.		0.0		\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f			0.0		\$		0.00)
	8g.	Pension or retirement income	80			0.0		\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8r	h.+	\$	0.0	0 -	+ \$		0.00	<u>)</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	0.0	0	\$		0.0	00
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	2,978.00]+[\$		0.00	= \$	2,978.00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			2,370.00	╢	Ψ_		0.00		2,370.00
11.	Stat Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep						chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	2,978.00
13.	Do y	you expect an increase or decrease within the year after you file this form	?							Comb month	ined Ily income
		No. Yes. Explain:									

F:11	in Abia informa	Aion Ao islamAif				1		
		ition to identify yo						
Deb	otor 1	Michael Anth	nony Mid	dione			k if this is: An amended filing	
Deb	otor 2					_	•	ving postpetition chapter
(Spo	ouse, if filing)					_	13 expenses as of	the following date:
Unit	ted States Bankr	ruptcy Court for the	CENTR	AL DISTRICT OF CALIFO	PRNIA	-	MM / DD / YYYY	
1 -	se number nown)							
0	fficial Fo	rm 106J				•		
		J: Your l	Exper	1888				12/1
Be	as complete ormation. If m	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				or supplying correct
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold					
1.								
	■ No. Go to	o line ∠. es Debtor 2 live i	n a sonar	ata housahold?				
	□ 103. D00		ii a sepai	ate nousenoia:				
		-	t file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debi	or 2.	
2			_					
2.	-	e dependents?	☐ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						■ No
	dependents	names.			son		7	☐ Yes
							_	No
					son		9	☐ Yes
					ala aila ta a		44	No
					daughter			☐ Yes
								□ No □ Yes
3.		penses include f people other t	han	No				□ res
		d your depende	!!	Yes				
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp	timate your ex penses as of a plicable date.	a date after the b	our bankr pankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the fol	orm as a su e J, check th	pplement in a Cha e box at the top o	apter 13 case to report f the form and fill in the
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
, •		,						
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4. \$		800.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		•		upkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues o ur residence , such as ho	me equity loops	4d. \$ 5. \$		0.00
J.	Additional	igage payiil	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	on residence, such as 110	mo equity idans	υ. φ		0.00

Debtor 1 Michael Anthony Middione	Case number (if known)	
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	0.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	250.00
6d. Other Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	715.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	158.00
). Personal care products and services	10. \$	73.00
. Medical and dental expenses	11. \$	60.00
Transportation. Include gas, maintenance, bus or train fare.	· 	
Do not include car payments.	12. \$	400.00
B. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	50.00
Charitable contributions and religious donations	14. \$	0.00
. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	0.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	 16. \$	0.00
Specify:	10. ф	0.00
17a. Car payments for Vehicle 1	17a. \$	400.00
17b. Car payments for Vehicle 2	17b. \$	195.00
17c. Other. Specify:	17c. \$	0.00
17d. Other Specify:	176. \$	0.00
Your payments of alimony, maintenance, and support that you did not report	· <u></u>	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106		0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	0.00
Other real property expenses not included in lines 4 or 5 of this form or on So		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
	21. +\$	285.00
. Other: Specify: misc (emergency)		205.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	3,386.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2 \$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,386.00
3. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,978.00
23b. Copy your monthly expenses from line 22c above.	23b\$	3,386.00
	·	
23c. Subtract your monthly expenses from your monthly income.		400.00
The result is your monthly net income.	23c. \$	-408.00
4. Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect y modification to the terms of your mortgage?		ase or decrease because c
No.		
□ Voc Evolain here:		

III III IIIIS IIIIOIIII	ation to identify your			MANAGE CONTRACTOR OF THE PARTY
ebtor 1	Michael Anthony			
ebtor 2	First Name	Middle Name	Last Name	
pouse if, filing)	First Name	Middle Name	Last Name	The second second
Inited States Ban	kruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA	ATT THE MARKET SHARE SHARE STORY OF THE STORY
ase number				
(known)				☐ Check if this is an
				amended filing
fficial Form	Secretary 1	n Individua	l Debtor's Schedul	
Clarati	on About a	III IIIuiviuua	Deptor 5 Scriedui	12/1
u must file this taining money o ars, or both. 18	form whenever you fi	le bankruptcy schedule n connection with a bar	onsible for supplying correct informates or amended schedules. Making a fikruptcy case can result in fines up t	alse statement, concealing property or
ou must file this otaining money o ears, or both. 18	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below	le bankruptcy schedule n connection with a bar 519, and 3571.	es or amended schedules. Making a f ikruptcy case can result in fines up t	ialse statement, concealing property, or o \$250,000, or imprisonment for up to 20
ou must file this otaining money o ears, or both. 18	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below	le bankruptcy schedule n connection with a bar 519, and 3571.	es or amended schedules. Making a f	alse statement, concealing property, or o \$250,000, or imprisonment for up to 20
ou must file this otaining money o ears, or both. 18	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below	le bankruptcy schedule n connection with a bar 519, and 3571.	es or amended schedules. Making a f ikruptcy case can result in fines up t	alse statement, concealing property, or o \$250,000, or imprisonment for up to 20
bu must file this ptaining money of the stars, or both. 18 Sign Did you pay	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below	le bankruptcy schedule n connection with a bar 519, and 3571.	es or amended schedules. Making a fikruptcy case can result in fines up to the second se	false statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms?
bu must file this ptaining money of the stars, or both. 18 Sign Did you pay	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below or agree to pay some	lle bankruptcy schedule n connection with a bar 519, and 3571, one who is NOT an atto	es or amended schedules. Making a fikruptcy case can result in fines up to the second se	false statement, concealing property, or o \$250,000, or imprisonment for up to 20
bu must file this ptaining money of ars, or both. 18 Sign Did you pay No Yes. Na	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below or agree to pay some	one who is NOT an atto	es or amended schedules. Making a fikruptcy case can result in fines up to be seen to be	false statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms? Itach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
bu must file this ptaining money of ars, or both. 18 Sign Did you pay No Yes. Na Under penalt	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below or agree to pay some	one who is NOT an atto	es or amended schedules. Making a fikruptcy case can result in fines up to the second se	false statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms? Itach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
bu must file this ptaining money of ars, or both. 18 Sign Did you pay No Yes. Na Under penalt	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below or agree to pay some ame of person	one who is NOT an atto	es or amended schedules. Making a fakruptcy case can result in fines up to be a second of the second	false statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms? Itach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
Did you pay No Ves. Na Under penalty that they are X Michael	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below or agree to pay some ame of person	one who is NOT an atto	es or amended schedules. Making a fikruptcy case can result in fines up to be seen to be	false statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms? Itach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
Did you pay No Ves. Na Under penalty that they are X Michael	form whenever you fi or property by fraud in U.S.C. §§ 152, 1341, 1 Below or agree to pay some ame of person y of perjury, I declare true and correct. Anthony Middione	one who is NOT an atto	es or amended schedules. Making a fakruptcy case can result in fines up to be a second former to help you fill out bankruptcy for help you fill you fi	false statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms? Itach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)

Fill	l in this inform	ation to identify you	ır case:			
	btor 1	Michael Anthon				
		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ban	kruptcy Court for the:	CENTRAL DISTRICT OF C	CALIFORNIA		
	se number					Check if this is an amended filing
St	as complete ar	of Financial	Affairs for Individ ible. If two married people ar , attach a separate sheet to the	e filing together, both are	equally responsible for su	
	<u> </u>). Answer every que etails About Your M	stion. arital Status and Where You I	Lived Before		
1.	What is your	current marital state	us?			
	■ Married □ Not marri					
2.	During the las	st 3 years, have you	lived anywhere other than w	here you live now?		
	□ No			-		
		all of the places you	lived in the last 3 years. Do not	include where you live now	<i>I</i> .	
	Debtor 1 Price		Dates Debtor 1	Debtor 2 Prior Ad		Dates Debtor 2
	12717 Valle Yucaipa, C		From-To: 9/19- 1/21	☐ Same as Debtor	ı	☐ Same as Debtor 1 From-To:
	es and territorie ☐ No ☐ Yes. Mak	es include Arizona, Ca	ver live with a spouse or lega alifornia, Idaho, Louisiana, Neva hedule H: Your Codebtors (Offi ur Income	ada, New Mexico, Puerto R		
4.	Fill in the total	amount of income yo	mployment or from operating ou received from all jobs and all I have income that you receive	businesses, including part	time activities.	endar years?
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calendar nuary 1 to Dec	year: cember 31, 2021)	■ Wages, commissions, bonuses, tips	\$58,420.00	☐ Wages, commissions, bonuses, tips	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Operating a business

☐ Operating a business

De			2-DK-1033 nthony Midd	Main Docu		30/22 Enter Page 33 of Cas			Desc
	_								
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		endar year l to Decembe	pefore that: er 31, 2020)	■ Wages, commissions, bonuses, tips		\$43,401.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business			☐ Operating a	business	
5.	Include and oth winning List eac	income rega er public ber ps. If you are ch source an	ardless of whei nefit payments filing a joint ca d the gross inc	ne during this year or the tweether that income is taxable. En pensions; rental income; into see and you have income that ome from each source separate.	xamples of terest; divi	of other income are a dends; money collec- vived together, list it of	alimony; child supp cted from lawsuits; only once under Do	royalties; and ebtor 1.	
				Dalistan 4			D - l- 4 0		
				Debtor 1 Sources of income Describe below.	each (befo	ss income from a source ore deductions and usions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pai	rt 3: L	ist Certain	Payments Yo	ı Made Before You Filed fo	r Bankru	ptcy			
6.	Are eitl	o. Neither	Debtor 1 nor	2's debts primarily consum Debtor 2 has primarily con a personal, family, or housel	sumer de	bts. Consumer debt	ts are defined in 11	U.S.C. § 101	1(8) as "incurred by an
		•	•	ore you filed for bankruptcy,	did you pa	ay any creditor a tota	al of \$6,825* or mo	re?	
		□ _{No.} □ _{Yes}	List below	each creditor to whom you p					
		* Subje	not include	reditor. Do not include payme payments to an attorney for nt on 4/01/22 and every 3 year	r this bank	ruptcy case.	-		
	■ Ye			or both have primarily consore you filed for bankruptcy,			al of \$600 or more?	?	
		■ No.		7.					
		□ _{Yes}	include pa	each creditor to whom you p yments for domestic support or this bankruptcy case.					
	Credit	or's Name a	and Address	Dates of payn	nent	Total amount paid	Amount you still owe	Was this p	ayment for
7	\A/:4h:	4 voor befe	ro von filed fe	r hankwinter, did	0.0.00			was an insi	dor?
7.	Insiders of which	s include you h you are an ess you ope	r relatives; any officer, director	r bankruptcy, did you make general partners; relatives or, person in control, or owner proprietor. 11 U.S.C. § 101. I	of any gen r of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and a	ou are a gener ny managing	ral partner; corporation agent, including one fo

☐ Yes. List all payments to an insider.

Insider's Name and Address Amount you still owe Reason for this payment **Dates of payment Total amount** paid

		Main Document	Page 34 of 51	
Debtor 1	Michael Anthony Middione		Case number (if known)	

8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.						
	No						
	Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name	
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.						
	■ No □ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	e case	
	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property Explain what happened		Value of the property			
11.	accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.					mounts from your Amount	
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes						
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave iifts	Value	
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.						
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		u contributed		s you ributed	Value	
Par	t 6: List Certain Losses						

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Del	btor 1 Michael Anthony Middione	Main Do	ocument Page 3	5 of 51 Case number	(if known)			
	or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include the ar	insurance coverage for the nount that insurance has paid ms on line 33 of Schedule A	d. List pending	Date of your loss	Value of property lost		
Par	rt 7: List Certain Payments or Transfers	3						
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or plinclude any attorneys, bankruptcy petition p	oreparing a ba	inkruptcy petition?			ty to anyone you		
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		cription and value of any pr sferred	Date payment or transfer was made	Amount of payment			
	The Travis Law Firm Attorney Fees 4294 Orange St. Riverside, CA 92501		rney Fees	1/1		\$2,000.00		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No							
	Yes. Fill in the details.	Dani	winting and value of	December		Data tuamafan waa		
	Person Who Received Transfer Address Person's relationship to you		cription and value of erty transferred	payments paid in ex	any property or received or debts change	Date transfer was made		
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset.			a self-settled tru	ust or similar device o	of which you are a		

Description and value of the property transferred

☐ Yes. Fill in the details.

Name of trust

Date Transfer was

made

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Debtor 1 Michael Anthony Middione

Case number (if known)

Pa	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Sto	orage Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?				
Pa	rt 9: Identify Property You Hold or Control f	for Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	■ No								
	Yes. Fill in the details. Owner's Name	Where is the prop		Describe the property	Value				
	Address (Number, Street, City, State and ZIP Code)	Code)	nate and Zii						
	rt 10: Give Details About Environmental Info								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	to own, operate, or utilize it, including disposal sites.								
	hazardous material, pollutant, contaminant,	or similar term.			o oubotunioo,				
	port all notices, releases, and proceedings tha								
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S ZIP Code)		Environmental law, if you know it	Date of notice				

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De	ebtor 1 Michael Anthony Middione		Case number (it known)				
0.5	Iller and a second a second and	16 of any male and of barranda an archaria 10					
25.	Have you notified any governmental un	it of any release of nazardous material?					
	No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Coo	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or	administrative proceeding under any envi	ronmental law? Include settlements	and orders.			
	■ No						
	☐ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pa	art 11: Give Details About Your Business	s or Connections to Any Business					
27.		ruptcy, did you own a business or have an		ny business?			
	☐ A sole proprietor or self-employ	ed in a trade, profession, or other activity,	either full-time or part-time				
	☐ A member of a limited liability c	ompany (LLC) or limited liability partnersh	ip (LLP)				
	☐ A partner in a partnership		Care Care a religion for				
	☐ An officer, director, or managing	g executive of a corporation					
	☐ An owner of at least 5% of the v	oting or equity securities of a corporation					
79	The state of the s						
	No. None of the above applies. Go						
	Yes. Check all that apply above and fill in the details below for each business.						
	Business Name Describe the nature of the business Address			Employer Identification number Do not include Social Security number or ITIN.			
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	y number of this.			
28.	Within 2 years before you filed for bank institutions, creditors, or other parties.	ruptcy, did you give a financial statement t	to anyone about your business? Inc	lude all financial			
	•						
	No Fill in the details below						
	☐ Yes. Fill in the details below.	100000	the state of the s				
	Address	Date Issued					
W.	(Number, Street, City, State and ZIP Code)						
Pai	rt 12: Sign Below	or Canner dons to Fry Lague .	Mar No. 1 St. Mar T. Lawrence				
with	trac and correct, i understand that makin	f Financial Affairs and any attachments, an ig a false statement, concealing property, o to \$250,000, or imprisonment for up to 20	or obtaining manay as assessed, but	that the answers raud in connection			
Mic Sig	chael Anthony Middione gnature of Debtor 1	Signature of Debtor 2					
Dat	te 1-29-22	Date					
- 1	VO	ement of Financial Affairs for Individuals F	iling for Bankruptcy (Official Form 1	107)?			
ΙY	res						
N	NO .	not an attorney to help you fill out bankru					
JΥ	es. Name of Person Attach the Bar	kruptcy Petition Preparer's Notice, Declaratio	n, and Signature (Official Form 119)				
MICI	Sta	tement of Financial Affairs for Individuals Filing	for Bankruptcy	page 6			
oftwa	rare Copyright (c) 1996-2022 Best Case, LLC - www.bestca	ise.com	Who are the state of the state	page 6			

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Debtor 1 Michael Anthony Middione Case number (if known)

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Debtor 1	Michael Anthony	/ Middione		
	First Name	Middle Name	Last Name	-
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	_
Case number				
(if known)				☐ Check if this is an amended filing
	400			
Official Fo	orm 108			

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Dart 1:	Liet Vour	Craditors	Who Have	Secured	Claime
Part II	LIST YOUR	Creditors	wno mave	Securea	Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Freedom Road Financial name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 2014 Harley Davidson FXDF-103 Dyna Fat Bob	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's Toyota Financial Services name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 2021 Toyota Corolla 10000 miles	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Michael Anthony Middione	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
	intention about any property or my estate that is a No settleast a second
Description of leased Property:	☐ Yes
Lessor's name: Atthorny Mindletto	Segregary of Debter 2 No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	□ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my property that is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal
11/1/11/1	V and an additional threat or other transfer or
Michael Anthony Middione Signature of Debtor 1	Signature of Debtor 2
Date 1-29-22	Date

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Central District of California

	Michael Anthony Middione		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSAT	TION OF ATTORNEY	FOR DE	BTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy, or agreed	to be paid t	o me, for services rendered or to
	For legal services, I have agreed to accept	\$		2,000.00
	Prior to the filing of this statement I have received	\$		2,000.00
	Balance Due			0.00
	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
	I have not agreed to share the above-disclosed compensation	in with any other person unless the	ov are memb	ers and associates of my law fi
	I have agreed to share the above-disclosed compensation w			or associates of my law min. 7
8 1 0	copy of the agreement, together with a list of the names of the names of the return for the above-disclosed fee, I have agreed to render legal. Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does to Representation of the debtors in any dischargement with the d	gal service for all aspects of the b lvice to the debtor in determining of affairs and plan which may be a confirmation hearing, and any adj	ankruptcy ca whether to f equired; ourned hear	ise, including: ile a petition in bankruptcy; ings thereof;
8 1 0	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does re Representation of the debtors in any discharg any other adversary proceeding.	gal service for all aspects of the barvice to the debtor in determining of affairs and plan which may be a confirmation hearing, and any adjust include the following service: eability actions, judicial lien	ankruptcy ca whether to f equired; ourned hear	ise, including: ile a petition in bankruptcy; ings thereof;
a li co	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not representation of the debtors in any discharg any other adversary proceeding. CER	gal service for all aspects of the barvice to the debtor in determining of affairs and plan which may be a confirmation hearing, and any adjunct include the following service: eability actions, judicial lien	ankruptcy ca whether to f equired; ourned hear	ise, including: ile a petition in bankruptcy; ings thereof; s, relief from stay actions
i i i i i i i i i i i i i i i i i i i	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not representation of the debtors in any discharg any other adversary proceeding. CER Certify that the foregoing is a complete statement of any agreement with the foregoing.	gal service for all aspects of the barvice to the debtor in determining of affairs and plan which may be a confirmation hearing, and any adjunct include the following service: eability actions, judicial lien	ankruptcy ca whether to f equired; ourned hear	ise, including: ile a petition in bankruptcy; ings thereof; s, relief from stay actions
I I	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not representation of the debtors in any discharge any other adversary proceeding. CER Certify that the foregoing is a complete statement of any agreed and representation of the debtors.	gal service for all aspects of the blvice to the debtor in determining of affairs and plan which may be reconfirmation hearing, and any adjunct include the following service: eability actions, judicial lien EXTIFICATION ment or arrangement for payment	ankruptcy ca whether to f equired; ourned hear avoidance	ise, including: ile a petition in bankruptcy; ings thereof; s, relief from stay actions
I I I Iss ba	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does responsible to the debtors in any discharge any other adversary proceeding. CER certify that the foregoing is a complete statement of any agreement with the debtor of the debtors in any discharge any other adversary proceeding.	gal service for all aspects of the belivice to the debtor in determining of affairs and plan which may be reconfirmation hearing, and any adjunct include the following service: eability actions, judicial lien ETIFICATION ment or arrangement for payment Dana Faith Travis 245316 Signature of Attorney	ankruptcy ca whether to f equired; ourned hear avoidance	ise, including: ile a petition in bankruptcy; ings thereof; s, relief from stay actions of
I I I I I	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not representation of the debtors in any discharge any other adversary proceeding. CER Certify that the foregoing is a complete statement of any agreed and representation of the debtors.	gal service for all aspects of the belivice to the debtor in determining of affairs and plan which may be reconfirmation hearing, and any adjunct include the following service: eability actions, judicial lien ETIFICATION ment or arrangement for payment Dana Faith Travis 245316 Signature of Attorney The Travis Law Firm 4294 Orange St.	ankruptcy ca whether to f equired; ourned hear avoidance	ise, including: ile a petition in bankruptcy; ings thereof; s, relief from stay actions
I I I Isis ba	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does responsible to the debtors in any discharge any other adversary proceeding. CER Certify that the foregoing is a complete statement of any agreed and the debtor of the debtors in any discharge and the debtor of the debtors in any discharge any other adversary proceeding.	gal service for all aspects of the betwice to the debtor in determining of affairs and plan which may be a confirmation hearing, and any adjusted include the following service: reability actions, judicial lien ETIFICATION ment or arrangement for payment Dana Faith Travis 245316 Signature of Attorney The Travis Law Firm 4294 Orange St. Riverside, CA 92501	ankruptcy ca whether to f equired; ourned hear avoidance	ise, including: ile a petition in bankruptcy; ings thereof; s, relief from stay actions
I I I I I	In return for the above-disclosed fee, I have agreed to render le Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not representation of the debtors in any discharge any other adversary proceeding. CER Certify that the foregoing is a complete statement of any agreed and the debtor of	gal service for all aspects of the betwice to the debtor in determining of affairs and plan which may be a confirmation hearing, and any adjusted include the following service: reability actions, judicial lien RTIFICATION ment or arrangement for payment Dana Faith Travis 245316 Signature of Attorney The Travis Law Firm 4294 Orange St. Riverside, CA 92501 951-274-9501 Fax: 951-7 thetravislawfirm@aol.com	ankruptcy ca whether to f equired; ourned hear avoidance to me for re	ise, including: ile a petition in bankruptcy; ings thereof; s, relief from stay actions

and the second of the second o

Debtor 1	Michael Anthony Mi	ddione
Debtor 2 (Spouse, if filing)		
United States E	Bankruptcy Court for the:	Central District of California
Case number (if known)		

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test* Calculation (Official Form 122A-2).
- □ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

Debtor 2 or

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Debtor 1

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					non-fil	ing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commiss	ions (before all	\$ 4,853.00	\$	0.00
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payments fron		\$ 0.00	\$	0.00
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3.	t. Include regula d, your depende	ar contributions ents, parents, olumn B is not	\$ 0.00	\$	0.00
5.	Net income from operating a business, profession,	or farm				
		De	btor 1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00	_			
	Net monthly income from a business, profession, or fai	rm \$ 0.00	Copy here -> 9	\$ 0.00	\$	0.00
6.	Net income from rental and other real property		_			
		De	btor 1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00	_			
	Net monthly income from rental or other real property	\$ 0.00	Copy here -> 9	\$ 0.00	\$	0.00
7.	Interest, dividends, and royalties		_	\$ 0.00	\$	0.00

Michael Anthony Middione Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below... 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 4,853.00 each column. Then add the total for Column A to the total for Column B. \$ 0.00 \$ 4,853.00 Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4,853.00 Multiply by 12 (the number of months in a year) x 12 12b. The result is your annual income for this part of the form 58,236.00 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA Fill in the number of people in your household. Fill in the median family income for your state and size of household. 83,435.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X MM MAA

Michael Anthony Middione
Official Form 122A-1

Case 6:22-bk-10336-MH Doc 1 Filed 01/30/22 Entered 01/30/22 05:59:56 Desc Main Document Page 44 of 51

Debtor 1 Michael Anthony Middione	Case number (if known)
Signature of Debtor 1	
Date 1-29-22 MM/DD/YYYY	
If you checked line 14a, do NOT fill out or file Form 122A-2.	and the second second section in the second section in the second section in the second section in the second section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section is a section in the sect
If you checked line 14b, fill out Form 122A-2 and file it with this form.	pleasured the implement of the industrial property of the second

Chapter / Sterement of Your Current Monthly Income

Case 6:22-bk-10336-MH Doc 1 Filed 01/30/22 Entered 01/30/22 05:59:56 Desc Main Document Page 45 of 51

Attorney or Party Name, Address, Telephone & FAX Nos.,	FOR COURT USE ONLY
State Bar No. & Email Address Dana Faith Travis 245316 4294 Orange St. Riverside, CA 92501 951-274-9501 Fax: 951-778-9621 California State Bar Number: 245316 CA	FOR COURT USE ONLY
thetravislawfirm@aol.com	
The state of the s	
☐ Debtor(s) appearing without an attorney	
■ Attorney for Debtor	
In re: Michael Anthony Middione	CASE NO.: CHAPTER: 7
and the same pages, recome	CHAPTER. 7
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
Debtor(s).	
	3
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's atto master mailing list of creditors filed in this bankruptcy case, consistent with the Debtor's schedules and I/we assume all	rney if applicable, certifies under penalty of perjury that the consisting of <u>2</u> sheet(s) is complete, correct, and responsibility for errors and omissions.
Date: 1-29-22	In water
	Signature of Debtor 1
Date:	CONTRACTOR CONTRACTOR
Date: 1-29-2022	Signature of Debtor 2 (joint debtor)) (if applicable)
Council a proper to the control of t	Signature of Attorney for Debtor (if applicable)

Michael Anthony Middione 16808 Man St Ste D # 138 Hesperia, CA 92345

Dana Faith Travis The Travis Law Firm 4294 Orange St. Riverside, CA 92501

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citibank Attn: Bankruptcy P.O. Box 790034 St Louis, MO 63179

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Freedom Road Financial Attn: Bankruptcy Po Box 4597 Oak Brook, IL 60522 San Bernardino County Dept. Attn: Bankruptcy P.O. Box 419064 Mail Station 100 Rancho Cordova, CA 95741

Toyota Financial Services Attn: Bankruptcy Po Box 8026 Cedar Rapids, IA 52409

Dana Faith Travis 245316 4294 Orange St. Riverside, CA 92501 951-274-9501 Fax: 951-778-9621 245316 CA thetravislawfirm@aol.com	FOR COURT USE ONLY
Attorney for Debtor(s)	FRANKE POLIVACIONES AREST
UNITED STATES BA CENTRAL DISTRIC	
n re:	CASE NO.:
Michael Anthony Middione	CHAPTER: 7
Andrews of the control of the contro	DECLARATION BY DEBTOR(S) AS TO WHETHER INCOME WAS RECEIVED FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION DATE [11 U.S.C. § 521(a)(1)(B)(iv)]
Debtor(s).	[No hearing Required]
ebtor(s) provides the following declaration(s) as to whether in ebtor(s) filing this bankruptcy case (Petition Date), as require eclaration of Debtor 1 I am Debtor 1 in this case, and I declare under penalty of During the 60-day period before the Petition Date (f perjury that the following information is true and correct:
✓ I was paid by an employer. Attached are copies of employment income I received from my employer du	of all statements of earnings, pay stubs, or other proof of uring this 60-day period. (If the Debtor's social security oof of income, the Debtor must cross out (redact) the
☐ I was not paid by an employer because I was eith	ner self-employed only, or not employed.

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Declara	ation of Debtor 2 (Joint Debtor) (if applicable)	
2. 🗌 I a	am Debtor 2 in this case, and I declare under penalty of perjury that the	following information is true and correct:
	During the 60-day period before the Petition Date (Check only ONE	box below):
	☐ I was paid by an employer. Attached are copies of all statements of employment income I received from my employer during this 60-day number or bank account is on a pay stub or other proof of income, the number(s) before filing this declaration.)	period. (If the Debtor's social security
	☐ I was not paid by an employer because I was either self-employed	d only, or not employed.
Date:		
	Printed name of Debtor 2	Signature of Debtor 2

Pages Company (Fig. 1) and the control of the contr

FedExe

Earnings Statement

Universal Protection Service, LP 161 Washington Street, Suite 600 Eight Tower Bridge

Conshohocken, PA 19428-2083

Exemptions Addl Fed: 5 \$0.00 Status Married

State: 5 \$0.00

For inquiries on this statement please call: (800)260-0852

Total Hours Worked: 60.00
Basis of Pay: Hourly

Page 001 of 001

Period Beg/End 12/17/2021 - 12/23/2021 Advice Date: 12/30/2021 Advice Number: 69631302 Batch Number: 86742

612599

Michael A Middione 16808 main st . ste D #138 Hesperia, CA 92345

Employee No:

Gross Pay	Current			Yes	rToDate	Misc Income/Adj	Current	YearToDate
Wages	112	1120.00		5	8420.10	Anniversary Bonus		200.00
Misc Income/Adj		.00			321.75	Anniversary Bonus		112.56
Total Gross Pay	112	0.00		58741.85		Gift Card		-50.00
Deductions						Gift Card		50.00
Pre-tax		.00 .00		Miscell Tax Adjustme		9.19		
Taxes	15	154.78 8224.14		8224.14	Pre-Tax Deductions			
Additional Deductions	27	8.42	10023.12					
Total Deductions	43	3.20	18247.26		18247.26			
NET PAY	\$68	86.80	\$40,494					
Federal Earnings	112	0.00	58782.66		8782.66			
FICA Earnings	1120.00			58782.66				
Wages	Reg	Prem	Reg	OT	DT	Taxes		
WkEnding Type	Rate	Rate	Hours	Hours	Hours	Federal W/H	48.98	2637.71
12/23/21 Regular	16.000		40.00			FICA	69.44	3644.54
12/23/21 Overtime	16.000	24.000		20.00)	Medicare	16.24	852.37
						CA W/H	6.68	374.93
		Total	40.00	20.00	.00	CA State Disability	13.44	714.59

 Additional Deductions
 276.92
 9969.12

 Fee Garnishment Proc
 1.50
 54.00

Benefits Accrued YTD Used Balance Sick Leave 8.00 8.00 48.00

Advice Number:

Advice Date:

69631302 12/30/2021

Universal Protection Service, LP 161 Washington Street, Suite 600

Eight Tower Bridge

Conshohocken, PA 19428-2083

Deposited to the account of

Account Number

Amount

Michael A Middione

XXXXXX9958

686.80

Case 6:22-bk-10336-MH Doc 1 Filed 01/30/22 Entered 01/30/22 05:59:56 Desc Main Document Page 51 of 51 Earnings Statement **FedExe**

Universal Protection Service, LP 161 Washington Street, Suite 600

Eight Tower Bridge Conshohocken, PA 19428-2083

Exemptions Addi Status Fed: 5 \$0.00 Married

State: 5 \$0.00

For inquiries on this statement please call: (800)260-0852

60.00

Total Hours Worked: Hourly Basis of Pav:

Page 001 of 001

Period Beg/End 12/10/2021 - 12/16/2021

Advice Date: 12/23/2021 Advice Number: 69404940 86573 Batch Number:

612599 Employee No:

> Michael A Middione 16808 main st . ste D #138 Hesperia, CA 92345

Gross Pay	Cui	rent		Yoa	rToDate	Misc Income/Adj	Current	YearToDate
Wages	112	0.00	0.00 57300.10		7300.10	Anniversary Bonus		200.00
Misc Income/Adj		.00	.00		321.75	Anniversary Bonus		112.56
Total Gross Pay	112	0.00		5	7621.85	Gift Card		50.00
Deductions						Gift Card		-50.00
Pro-tax		.00			.00	Miscell Tax Adjustme		9.19
Taxes	15	4.78			8069.36	Pre-Tax Deductions		
Additional Deductions	27	8.42			9744.70			
Total Deductions	43	433.20 17814.		7814.06				
NET PAY	\$68	6.80	ica samulus	\$39	,807.79			
Federal Earnings		0.00			7662.66			
FICA Earnings	112	0.00		5	7662.66			
Wages	Reg	Prem	Reg	OT	DT	Taxes		
WkEnding Type	Rato	Rate	Hours	Hours	Hours	Federal W/H	48.98	2588.73
12/16/21 Regular	16.000		40.00			PICA	69.44	3575.10
12/16/21 Overtime	16.000	24.000		20.00	ı	Medicaro	16.24	836.13
						CA W/H	6.68	368.25
		Total	40.00	20.00	.00	CA State Disability	13.44	701.15

Additional Doductions Child Support 276.92 9692.20 52.50 1.50 Pee Garnishment Proc

Benefits Accrued TTD Used Balance 48.00 Sick Leave 8.00 8.00

Advice Number:

Advice Date:

69404940 12/23/2021

Universal Protection Service, LP 161 Washington Street, Suite 600

Eight Tower Bridge

Conshohocken, PA 19428-2083

Account Number

Amount

Deposited to the account of Michael A Middlone

XXXXXX9958

686.80